

MEETING MINUTES

Project Name: IPRS	Doc. Version No: 1.0	Status: Final
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Meeting Name: IPRS Core Team Meeting
Facilitator: Eric Johnson, DMH
Scribe: Carlisa Stallings
Date: 11/01/06
Time: 10:30 – 11:30 a.m.
Location: Hargrove, Conference Room D

IPRS Core Team Attendees:

x Rick Kretschmer
 Cathy Bennett
 x Cheryl McQueen
 Sara Parks
 Gary Imes
 Joyce Sims
 x Rick Devell
 x Carlisa Stallings
 x Thelma Hayter
 x Eric Johnson

Others:

Linda Smith
 x Jamie Herubin
 X Sandy Flores
 x Mike Frost
 x Myran Harris
 Paul Carr
 x Chris Ferrell

Attendees:

x Alamance-Caswell	x Onslow-Carteret
x Albemarle	OPC
x Catawba	x Pathways
x Centerpoint	Pitt
x Crossroads	Roanoke-Chowan
x Cumberland	x Rockingham
x Durham	x Sand hills Center
x Eastpointe	x SE Center
x Edgecombe-Nash	SE Regional
x Five – County MHA	Smoky Mountain
x Foothills	x Tideland
Guilford	x Wake
x Johnston	x Western Highlands
x Mecklenburg	x Wilson-Greene
x Neuse	
x New River	

Attendees:

Item No. Topics

1. Roll call
2. Please mute phones or refrain from excess activity to help with communications. Please state your name and which "area program" you are from when you speak. **Also, please do not place IPRS Core Team call on hold because of potential distraction to call discussion.**
3. No checkwrite to review
4. Upcoming Check-writes (cut-off dates) – **November 3, 9, 17**
5. Agenda items
 - **YP830-codes against ASAO/CSAO target pops**
 - **YP851/852 – Rick**
 - **AMSRE – MH Concurrency**
 - Reminder....Send in NPI data
 - IPRS Questions or Concerns
 - MMIS Updates – Tim Sullivan & Chris Ferrell
 - Medicaid Questions or Concerns
6. **DMH and/or EDS concluding remarks.**
 - a. For North Carolina Medicaid claim questions / inquiries, please call EDS Provider Services at 1-800-688-6696 or 1-919-851-8888 and enter the appropriate extension listed below or 0 for the operator.
 - i. Physician phone analyst (i.e. Independent mental Health Providers – 4706
 - ii. Hospital phone analyst (i.e. Enhanced Service Providers / LMEs) - 4704
7. **Roll Call Updates**

Next Meeting: November 1, 2006

For assistance with IPRS claims, adjustments, R2Web, accessing application, etc., call the IPRS Help Desk – 1-800-688-6696, ext 53355, M-F, 8 a.m.-4:30 p.m., excluding holidays.

ADMINISTRATION NOTES (10:30 a.m. AREA PROGRAMS CONFERENCE CALL)	
Item No.	Topics
1.	Roll Call
2.	Please mute phones or refrain from excess activity to help with communications. Please state your name and which “area program” you are from when you speak. Also, please do not place IPRS Core Team call on hold because of potential distraction to call discussion.
3.	No checkwrite to review
4.	Upcoming Checkwrites –November 3, 9, 17
5.	<p>PLEASE NOTE:</p> <ul style="list-style-type: none"> * There will NOT be a Core Team Meeting on 11/15/06 or 11/22/06. * Next week’s checkwrite cutoff date is Thursday, November 9, 2006 instead of Friday, November 10, 2006. This change is due to the Veteran’s Day holiday. * It was confirmed that 2 checkwrite weeks will be skipped in December 2006. <p>Agenda items</p> <ul style="list-style-type: none"> • YP830 (H0001) will be added to ASAO and CSAO pop groups • DMA is sending memo to lift the edit regarding the 6000 limitation to T1017-HI. In the meantime, continue to send in denials with appropriate documentation to Carol Robertson for potential manual override. • Window 6 for Enhanced Services is confirmed; cutoff date is 12/31/06 for LME’s to bill. Review previous documentation. <p>Q: Jeanna (Catawba) – Any updates on whether or not LME’s have to apply for an NPI number if not providing healthcare services A: Thelma – Will hopefully have information next Wednesday.</p> <p>Q: Kim (Neuse) – Any feedback on CDSA denials A: Chris – EDS received memo from DMA to change the date. No forecast on implementation date.</p> <p>Q: Jeanna (Catawba) – What are the specifics of the memo? A: Chris – Memo is regarding CDSA and age groups 3 to 4. Q: Will claims be automatically processed?</p>

	<p>A: Chris – LME will most likely have to resubmit claims. Q: Is there a target date? A: Chris – No</p> <ul style="list-style-type: none"> • YP851/852 - Rick – Budget allocation for Public Psychiatric Funds - Rick explained that no default rates will be set; LMEs will need to send in provider-specific rates. <p>Q: Janet (Johnston) – Is it YM851/YM852 as previously stated in the memo? A: Rick confirmed that the correct codes are YP851 and YP852 Q: How far back can LMEs bill? A: DOS 10/2/06</p> <p>Thelma explained that the Array of Services will be updated.</p> <p>Q: Can LMEs bill for these services in the next checkwrite? A: Rick – No, wait until the following checkwrite; DMH budget office will send an allocation letter to the LME when funds are available.</p> <p>Q: Kim (Neuse) – Since there are no default rates, when will the LMEs need to send in specific rates? A: Rick – Will need to send before you can bill for services</p> <p>Q: Residential Room & Board – memo states can go back 6 month; however will cross fiscal year. A: This may be a problem if it crosses fiscal year because you will receive a timely filing error. Q: Which memo states this? A: Communication Bulletin #64. DMH will follow through and respond back.</p> <ul style="list-style-type: none"> • Rick – New rates were incorrectly loaded; however retro-rate process will run to correct. • AMSRE – MH Concurrency – Thelma - Regarding AMSRE, SA, and DD pop groups, Thelma stated that clients who are in stable recovery cannot be enrolled in AMSRE with another pop group. • FARO NPI presentation will be sent to Core Team next week; LMEs are encouraged to print out individual copies and bring to FARO • Reminder to Send in NPI Data – It is important that you send the zip + 4 of both the physical and accounting locations. Don't forget your 34049# needs to be associated with an NPI number. Send your NPI number to Medicaid as well. <p>IPRS Questions or Concerns:</p> <p>Q: Terry (Eastpointe) – 10/17/06 checkwrite, claims paid in IPRS, but should have gone to Medicaid for payment A: Send in examples to IPRS Q & A</p> <p>Q: Beth (Pathways) – update on Family Planning Waiver claims routing to Medicaid instead of IPRS. A: Chris – claims did not route to IPRS because the attending providers were not IPRS attending providers; also, the diagnosis codes were not part of the IPRS benefit packages. A: Cheryl – reminded that in order for claims to route to IPRS, IPRS criteria must be met. Q: Kelly (Durham) – Does 1 unit equal 14 minutes? A: Rick – In Medicaid, rounding up is not permitted. For state services, follow the 8 minute</p>
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	<p>rule which states that after 8 minutes, can round up R: Clarification: The 8 minute rule is no longer in effect for DMH claims; 0-14 is not considered a unit, but bundling of services can be bundled with another appropriate service as per DMH guidelines.</p> <p>MMIS Updates – Tm Sullivan & Chris Ferrell</p> <p>Medicaid Questions or Concerns:</p> <p>Q: Cathy (Centerpoint) - paid for Enhanced Services – billed for contract provider; recouped IPRS and then paid in Medicaid on the 10/10/06 RA; should not have been paid.</p> <p>A: Send examples to IPRS Q&A</p> <p>DMH and/or EDS Concluding Remarks:</p> <ul style="list-style-type: none">a. For North Carolina Medicaid claim questions / inquires please call EDS Provider Services at 1-800-688-6696 or 1-919-851-8888 and enter the appropriate extension listed below or 0 for the operator.<ul style="list-style-type: none">i. Physician phone analyst (i.e. Independent Mental Health Providers)- 4706ii. Hospital phone analyst (i.e. Enhanced Service Providers / LMEs) - 4707 <p>Updates to Roll Call</p>
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Action Items

Item No.	Open Date	Description	Assigned To	Comments	Status	Target Date
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Issue Items

Item No.	Open Date	Description	Assigned To	Comments	Status	Target Date
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